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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND

 Application Number
 09/670,900

 Filing Date
 September 28, 2000

 First Named Inventor
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 3625

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 Attorney Docket Number
 94-1008

CHANGE OF CORRESPONDENCE ADDRESS

hereby revoke all previous powers of attorney given in the above-identified application.	
A Power of Attorney is submitted herewith.	
OR	
✓ I hereby appoint the practitioners associated with the Customer Number:	
✓ Please change the correspondence address for the above-identified application to:	
✓ The address associated with Customer Number: 63710	
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am the: Applicant/Inventor.	
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)	
SIGNATURE of Applicant or Assignee of Record	
Signature XX	
Name Dean P. Alderucci	
Date April 21, 2008 Telephone (212) 829-7009	
IOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than or ignature is required, see below*.	10
Total of 1 forms are submitted	_

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to proceed) an application. Confidentially is governed by 35 U.S.C. 1/22 and 37 CFR 1.1 and 1.14. This collection is estimated to take 3 minutes to complete including plants of the confidence of the confide